UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/290,149	04/12/1999	TODD D. ALLECKSON	10990978-1	9522

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EXAMINER
RIMELL, SAMUEL G

ART UNIT	PAPER NUMBER
2165	

DATE MAILED: 05/04/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

		Application No.	**Applicant(s)**
Office Action Summary		09/290,149	ALLECKSON ET AL.
		Examiner	**Art Unit**	
		Sam Rimell	2165	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE _3_ MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.
- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). .
  Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) ☐ Responsive to communication(s) filed on _____.
2a) ☐ This action is **FINAL**.   2b) ☒ This action is non-final.
3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) ☒ Claim(s) _1,3-5,7-17,19 and 21-32_ is/are pending in the application.
   4a) Of the above claim(s) _____ is/are withdrawn from consideration.
5) ☐ Claim(s) _____ is/are allowed.
6) ☒ Claim(s) _1, 3-5, 7-17, 19, 21-32_ is/are rejected.
7) ☐ Claim(s) _____ is/are objected to.
8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) ☐ The specification is objected to by the Examiner.
10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
   Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
   Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
   a) ☐ All   b) ☐ Some * c) ☐ None of:
   1. ☐ Certified copies of the priority documents have been received.
   2. ☐ Certified copies of the priority documents have been received in Application No. _____.
   3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
   * See the attached detailed Office action for a list of the certified copies not received.

SAM RIMELL
PRIMARY EXAMINER

Attachment(s)
1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☐ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
   Paper No(s)/Mail Date _____.
4) ☐ Interview Summary (PTO-413)
   Paper No(s)/Mail Date. _____ .
5) ☐ Notice of Informal Patent Application (PTO-152)
6) ☐ Other: _____.

The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the

basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(e) the invention was described in a patent granted on an application for patent by another filed in the United
States before the invention thereof by the applicant for patent, or on an international application by another who
has fulfilled the requirements of paragraphs (1), (2), and (4) of section 371(c) of this title before the invention
thereof by the applicant for patent.

Claims 1, 3-5, 7-17, 19, 21-32 are rejected under 35 U.S.C. 102(e) as being anticipated by

Brown (U.S. Patent 5,832,448) in view of Bocker et al. (U.S. Patent 5,507,288).

Claim 1:   FIG. 1 of Brown discloses an arrangement where digital data is received at a

clinical server (12) from patient sites (36, 46). The digital data is processed so as to produce the

output screens (26). The data displayed on the output screens includes clinical statistics (blood

glucose values) and administrative statistics (the names of the patients, the dates of data receipt

and the completeness of the data). The clinical server (12) provides access to the data by one or

more clinicians). The protocol for communicating the data between the patients and the

physicians may inherently be Internet protocol, particularly as the data is communicated over a

telephone network using standard modems. The output screen (26) is actually a series of

hierarchical output screens. The output screens can be hierarchically arranged by patient group,

date of data collection, or individual patient being viewed. Each screen may represent a "higher"

or "lower" hierarchical level, although the claims do not state what exactly constitutes a "higher"

level or "lower" level. Statistics from 10 patients are collected and presented on chart (26). The

physician can further select or flag patients. The patients can also be flagged automatically by

presenting a blinking icon, represented by the dashed diamonds. The blinking icon represents

non-compliant data (col. 7, lines 1-37). The conclusion that non-compliant data exists is the

result of processing and evaluating statistics (glucose data) from the patient. When the physician

selects the flagged patients (as evidenced by the dashed circles) a list is automatically generated

of the names in listbox (70). The physician does not manually type in the names. They are

automatically printed in the box (70) after the selection. A snapshot screen is illustrated in FIG.

5. This screen is a screen display of an e-mail that pertains to a specific patient and includes at

least one field pertaining to a treatment plan: "Measure You Blood Glucose Regularly".

Brown differs only from claim 1, part (f), in that it does compile a flagged list of patients,

but the flagging is based upon completeness of data rather than the body measured glucose

values. However, FIG. 5 of Bocker et al. teaches an analogous graphical output display screen

for measured glucose values. The bars 56, 57 define warning limits, which when exceeded enter

an alarm zone (col. 8, lines 42-60). It would have been obvious to one of ordinary skill in the art

to modify Brown to additionally include the warning limit bars on its graphical display (26) and

to provide additional automatic flagging of patients with inappropriate glucose levels that enter

into the alarm zone.

Claim 3-4: As seen in screen (26), the digital data from the patient has an associated time

scale, and the absolute time of measurement events is determined and displayed on the on the

chart (26).

Claim 5: The system derives data from a plurality of patients. The time scale of the data

is determined and displayed.

Claim 7: When the data is flagged in display (26) the patient has a health parameter with

at least functional parameter that is out of a desired range.

Claim 8: Statistics are continually received from patients over time, and thus continually updated.

Claim 9: The clinician may select patients that have been flagged to appear on a printed list or receive messages. The physician can access clinical information by reviewing the display (26).

Claim 10-11: The collection of data over a period of days, as in display (26) presents a series of historical data.

Claim 12: Statistics are presented on the devices and flags of health parameters.

Claim 13: The users of the system of FIG. 1 have different levels of access. Patients cannot access the data sent to the clinician.

Claim 14: See remarks for claim 1.

Claim 15-16: See remarks for claims 3-4.

Claim 17: The system includes a master patient database (18) which includes a memory.

Claim 19: See remarks for claim 1.

Claim 21: See remarks for claims 10-11.

Claim 22: Items can be selected for graphical display, such as date of collection, name of patient, and patient group.

Claim 23: See remarks for claim 8.

Claim 24: See remarks for claim 1.

Claim 25: See remarks for claim 22.

Claim 26: The administrative computer is the server (12). The clinician computer is the clinician workstation (22).

Claims 27-28: See remarks for claims 1 and 3.

Claim 29-32: As seen in viewer (26) the name of a specific patient is selected. Particular data for the patient is flagged by a dotted line. The date of flagging is indicated by the date indicated in the top right corner. The reason for flagging is due to sparse or non-compliant data. The patient's telephone number would inherently be located in the master patient database, and being in this database, retrievable by the clinician.

Remarks

Applicant's arguments have been considered, but are moot in light of the grounds of rejection. This office action is made non-final.

Any inquiry concerning this communication should be directed to Sam Rimell at telephone number (571) 272-4084.

Sam Rimell
Primary Examiner
Art Unit 2165